

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

American Liberty PAC

ADDRESS (number and street) ▼

1006 Cameron Street

☐ Check if different than previously reported. (ACC)

Alexandria

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00545798

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☒ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

01

01

2015

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

06

30

2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Nancy H. Watkins, Assistant Treasurer

Signature of Treasurer

Nancy H. Watkins, Assistant Treasurer

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

07

10

2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Liberty PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
01 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		1675.63
(b) Cash on Hand at Beginning of Reporting Period.....	1675.63	
(c) Total Receipts (from Line 19)	28778.74	28778.74
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	30454.37	30454.37
7. Total Disbursements (from Line 31)	29241.42	29241.42
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1212.95	1212.95
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American Liberty PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 01 / 01 / 2015

To:

 M M / D D / Y Y Y Y Y
 06 / 30 / 2015
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

8500.00

8500.00

(ii) Unitemized

17627.04

17627.04

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

26127.04

26127.04

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

26127.04

26127.04

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

2651.70

2651.70

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

28778.74

28778.74

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

28778.74

28778.74

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	29241.42	29241.42
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	29241.42	29241.42
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	29241.42	29241.42
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	29241.42	29241.42

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	26127.04	26127.04
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	26127.04	26127.04
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	29241.42	29241.42
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	29241.42	29241.42

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 35
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
American Liberty PAC

Full Name (Last, First, Middle Initial) A. Ronald Kessler			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>06 / 08 / 2015</div> </div>	
Mailing Address 2000 Twin Oaks			Transaction ID : SA11AI.8011	
City Girard	State OH	Zip Code 44420	Amount of Each Receipt this Period <div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. C				
Name of Employer Kessler Marketing Group, Inc.		Occupation c.e.o.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>		

Full Name (Last, First, Middle Initial) B. Arlo Richadson			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 11 / 2015</div> </div>	
Mailing Address 2339 19th Avenue			Transaction ID : SA11AI.7976	
City Greeley	State CO	Zip Code 80631	Amount of Each Receipt this Period <div> <div>500.00</div> </div>	
FEC ID number of contributing federal political committee. C				
Name of Employer Richmark Companies		Occupation owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>500.00</div> </div>		

Full Name (Last, First, Middle Initial) c. Corrine S. Spence			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>01 / 15 / 2015</div> </div>	
Mailing Address 1508 Eureka Road			Transaction ID : SA11AI.7818	
City Roseville	State CA	Zip Code 95661	Amount of Each Receipt this Period <div> <div>500.00</div> </div>	
FEC ID number of contributing federal political committee. C				
Name of Employer n/a		Occupation retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>500.00</div> </div>		

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 35

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Liberty PAC

Full Name (Last, First, Middle Initial)

A. Corrine S. Spence

Mailing Address 1508 Eureka Road

City State Zip Code
 Roseville CA 95661

FEC ID number of contributing
federal political committee.

C

Name of Employer

n/a

Occupation

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 22 / 2015

Transaction ID : SA11AI.7824

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Corrine S. Spence

Mailing Address 1508 Eureka Road

City State Zip Code
 Roseville CA 95661

FEC ID number of contributing
federal political committee.

C

Name of Employer

n/a

Occupation

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

01 / 22 / 2015

Transaction ID : SA11AI.7827

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Corrine S. Spence

Mailing Address 1508 Eureka Road

City State Zip Code
 Roseville CA 95661

FEC ID number of contributing
federal political committee.

C

Name of Employer

n/a

Occupation

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

01 / 26 / 2015

Transaction ID : SA11AI.7833

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 35
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
American Liberty PAC

A. Corrine S. Spence Full Name (Last, First, Middle Initial) Mailing Address 1508 Eureka Road City Roseville State CA Zip Code 95661 FEC ID number of contributing federal political committee. C Name of Employer n/a Occupation retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1400.00			Date of Receipt M M / D D / Y Y Y Y Y 01 / 26 / 2015 Transaction ID : SA11Al.7834 Amount of Each Receipt this Period 500.00
B. Corrine S. Spence Full Name (Last, First, Middle Initial) Mailing Address 1508 Eureka Road City Roseville State CA Zip Code 95661 FEC ID number of contributing federal political committee. C Name of Employer n/a Occupation retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5400.00			Date of Receipt M M / D D / Y Y Y Y Y 01 / 26 / 2015 Transaction ID : SA11Al.7835 Amount of Each Receipt this Period 4000.00
C. Corrine S. Spence Full Name (Last, First, Middle Initial) Mailing Address 1508 Eureka Road City Roseville State CA Zip Code 95661 FEC ID number of contributing federal political committee. C Name of Employer n/a Occupation retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5500.00			Date of Receipt M M / D D / Y Y Y Y Y 02 / 17 / 2015 Transaction ID : SA11Al.7865 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional)..... ▶			4600.00
TOTAL This Period (last page this line number only)..... ▶			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 35
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
American Liberty PAC

<p>Full Name (Last, First, Middle Initial) A. Corrine S. Spence</p> <p>Mailing Address 1508 Eureka Road</p> <p>City State Zip Code Roseville CA 95661</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation n/a retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 7000.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 03 / 02 / 2015 Transaction ID : SA11AI.7878</p> <p>Amount of Each Receipt this Period 1500.00</p>		
<p>Full Name (Last, First, Middle Initial) B. Corrine S. Spence</p> <p>Mailing Address 1508 Eureka Road</p> <p>City State Zip Code Roseville CA 95661</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation n/a retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 7300.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 03 / 24 / 2015 Transaction ID : SA11AI.7908</p> <p>Amount of Each Receipt this Period 300.00</p>		
<p>Full Name (Last, First, Middle Initial) c. Corrine S. Spence</p> <p>Mailing Address 1508 Eureka Road</p> <p>City State Zip Code Roseville CA 95661</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation n/a retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 7400.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 14 / 2015 Transaction ID : SA11AI.7930</p> <p>Amount of Each Receipt this Period 100.00</p>		
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>1900.00</p>		
<p>TOTAL This Period (last page this line number only)..... ▶</p>					

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 35

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Liberty PAC

Full Name (Last, First, Middle Initial)

A. Corrine S. Spence

Mailing Address 1508 Eureka Road

City State Zip Code
 Roseville CA 95661

FEC ID number of contributing
federal political committee.

C

Name of Employer

n/a

Occupation

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 14 / 2015

Transaction ID : SA11AI.7931

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Carol R. Wilson

Mailing Address 2197 Sutter View Lane

City State Zip Code
 Lincoln CA 95648

FEC ID number of contributing
federal political committee.

C

Name of Employer

n/a

Occupation

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 18 / 2015

Transaction ID : SA11AI.7993

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.00

8500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 35

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input checked="" type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American Liberty PAC

Full Name (Last, First, Middle Initial)

A. William J. McCarthy & Associates, Inc.

Mailing Address 1006 Cameron Street

City	State	Zip Code
Alexandria	VA	22314

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

683.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2015

Transaction ID : SA17.7895

Amount of Each Receipt this Period

683.01

online advertising revenue

Full Name (Last, First, Middle Initial)

B. William J. McCarthy & Associates, Inc.

Mailing Address 1006 Cameron Street

City	State	Zip Code
Alexandria	VA	22314

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1453.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2015

Transaction ID : SA17.7896

Amount of Each Receipt this Period

770.66

online advertising revenue

Full Name (Last, First, Middle Initial)

C. William J. McCarthy & Associates, Inc.

Mailing Address 1006 Cameron Street

City	State	Zip Code
Alexandria	VA	22314

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2058.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2015

Transaction ID : SA17.7897

Amount of Each Receipt this Period

604.49

online advertising revenue

SUBTOTAL of Receipts This Page (optional)..... ►

2058.16

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 35

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

American Liberty PAC

Full Name (Last, First, Middle Initial)

A. William J. McCarthy & Associates, Inc.

Mailing Address 1006 Cameron Street

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2387.27

Date of Receipt

04 / 11 / 2015

Transaction ID : SA17.7925

Amount of Each Receipt this Period

329.11

online advertising revenue

Full Name (Last, First, Middle Initial)

B. William J. McCarthy & Associates, Inc.

Mailing Address 1006 Cameron Street

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2651.70

Date of Receipt

05 / 02 / 2015

Transaction ID : SA17.7953

Amount of Each Receipt this Period

264.43

online advertising revenue

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

593.54

2651.70

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 35

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American Liberty PAC

Full Name (Last, First, Middle Initial)

A. Impact Analytics, LLC

Mailing Address 1515 N. Federal Highway, #305

City Boca Raton State FL Zip Code 33432

Purpose of Disbursement
online advertising-non candidate

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 19 / 2015
Transaction ID : SB21B.7815

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Impact Analytics, LLC

Mailing Address 1515 N. Federal Highway, #305

City Boca Raton State FL Zip Code 33432

Purpose of Disbursement
online advertising-non candidate

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 12 / 2015
Transaction ID : SB21B.7857

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Impact Analytics, LLC

Mailing Address 1515 N. Federal Highway, #305

City Boca Raton State FL Zip Code 33432

Purpose of Disbursement
online advertising-non candidate

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 24 / 2015
Transaction ID : SB21B.7880

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 35

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Liberty PAC

Full Name (Last, First, Middle Initial)

A. Impact Analytics, LLC

Mailing Address 1515 N. Federal Highway, #305

City Boca Raton State FL Zip Code 33432

Purpose of Disbursement
online advertising-non candidate

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 05 / 2015
Transaction ID : SB21B.7881

Amount of Each Disbursement this Period

728.63

Full Name (Last, First, Middle Initial)

B. Maelstrom Technology Services, LLC

Mailing Address 200 S. Executive Drive, #101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 22 / 2015
Transaction ID : SB21B.7822

Amount of Each Disbursement this Period

88.55

Full Name (Last, First, Middle Initial)

C. Maelstrom Technology Services, LLC

Mailing Address 200 S. Executive Drive, #101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 26 / 2015
Transaction ID : SB21B.7831

Amount of Each Disbursement this Period

293.55

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1110.73

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

American Liberty PAC

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

American Liberty PAC



72.57

Category/
Type

MM / DD / YYYY

48.58

Category/
Type

Age Group	Percentage
18-24	160.18
25-34	~100
35-44	~100
45-54	~100
55-64	~100
65-74	~100
75-84	~100
85+	~100

Category/
Type

Age Group	Percentage
18-24	~10%
25-34	~28%
35-44	~15%
45-54	~12%
55-64	~10%
65-74	~8%
75-84	~5%
85+	~3%

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

American Liberty PAC

Three 7-segment displays are shown, each with a different number. The first display shows '03', the second shows '06', and the third shows '2015'. Each display has a small 'M' or 'D' or 'Y' label above it, indicating the unit (Month, Day, Year).



65.90

Category/
Type

MM / DD / YYYY

38.41

Category/
Type

M M / D D / Y Y Y Y
03 16 2015

90.60

Category/
Type

194.91

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 35

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Liberty PAC

Full Name (Last, First, Middle Initial)

A. Maelstrom Technology Services, LLC

Mailing Address 200 S. Executive Drive, #101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 20 2015
Transaction ID : SB21B.7904

Amount of Each Disbursement this Period

27.65

Full Name (Last, First, Middle Initial)

B. Maelstrom Technology Services, LLC

Mailing Address 200 S. Executive Drive, #101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 24 2015
Transaction ID : SB21B.7907

Amount of Each Disbursement this Period

42.87

Full Name (Last, First, Middle Initial)

C. Maelstrom Technology Services, LLC

Mailing Address 200 S. Executive Drive, #101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 27 2015
Transaction ID : SB21B.7910

Amount of Each Disbursement this Period

20.63

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

91.15

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

American Liberty PAC

19.97

State: District:

04 / 02 / 2015

21.27

State: District:

04 / 07 / 2015

25.00

State: District:

Age Group	Percentage of Respondents
18-24	10.0%
25-34	15.0%
35-44	20.0%
45-54	25.0%
55-64	30.0%
65-74	35.0%
75+	66.24%

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 35

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Liberty PAC

Full Name (Last, First, Middle Initial)

A. Maelstrom Technology Services, LLC

Mailing Address 200 S. Executive Drive, #101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 10 / 2015
Transaction ID : SB21B.7924

Amount of Each Disbursement this Period

36.60

Full Name (Last, First, Middle Initial)

B. Maelstrom Technology Services, LLC

Mailing Address 200 S. Executive Drive, #101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 14 / 2015
Transaction ID : SB21B.7928

Amount of Each Disbursement this Period

34.07

Full Name (Last, First, Middle Initial)

C. Maelstrom Technology Services, LLC

Mailing Address 200 S. Executive Drive, #101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 16 / 2015
Transaction ID : SB21B.7934

Amount of Each Disbursement this Period

16.98

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

87.65

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 35

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Liberty PAC

Full Name (Last, First, Middle Initial)

A. Maelstrom Technology Services, LLC

Mailing Address 200 S. Executive Drive, #101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 20 / 2015
Transaction ID : SB21B.7937

Amount of Each Disbursement this Period

23.70

Full Name (Last, First, Middle Initial)

B. Maelstrom Technology Services, LLC

Mailing Address 200 S. Executive Drive, #101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 24 / 2015
Transaction ID : SB21B.7941

Amount of Each Disbursement this Period

55.00

Full Name (Last, First, Middle Initial)

C. Maelstrom Technology Services, LLC

Mailing Address 200 S. Executive Drive, #101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 27 / 2015
Transaction ID : SB21B.7946

Amount of Each Disbursement this Period

44.62

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.32

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 35

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Liberty PAC

Full Name (Last, First, Middle Initial)

A. Maelstrom Technology Services, LLC

Mailing Address 200 S. Executive Drive, #101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 30 2015
Transaction ID : SB21B.7954

Amount of Each Disbursement this Period

28.62

Full Name (Last, First, Middle Initial)

B. Maelstrom Technology Services, LLC

Mailing Address 200 S. Executive Drive, #101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 04 2015
Transaction ID : SB21B.7960

Amount of Each Disbursement this Period

24.88

Full Name (Last, First, Middle Initial)

C. Maelstrom Technology Services, LLC

Mailing Address 200 S. Executive Drive, #101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 07 2015
Transaction ID : SB21B.7966

Amount of Each Disbursement this Period

9.57

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

63.07

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 35

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Liberty PAC

Full Name (Last, First, Middle Initial)

A. Maelstrom Technology Services, LLC

Mailing Address 200 S. Executive Drive, #101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 11 / 2015

Transaction ID : SB21B.7971

Amount of Each Disbursement this Period

51.55

Full Name (Last, First, Middle Initial)

B. Maelstrom Technology Services, LLC

Mailing Address 200 S. Executive Drive, #101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 14 / 2015

Transaction ID : SB21B.7978

Amount of Each Disbursement this Period

45.50

Full Name (Last, First, Middle Initial)

C. Maelstrom Technology Services, LLC

Mailing Address 200 S. Executive Drive, #101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 18 / 2015

Transaction ID : SB21B.7986

Amount of Each Disbursement this Period

54.40

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

151.45

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 35

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Liberty PAC

Full Name (Last, First, Middle Initial)

A. Maelstrom Technology Services, LLC

Mailing Address 200 S. Executive Drive, #101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 21 2015
Transaction ID : SB21B.7987

Amount of Each Disbursement this Period

7.64

Full Name (Last, First, Middle Initial)

B. Maelstrom Technology Services, LLC

Mailing Address 200 S. Executive Drive, #101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 29 2015
Transaction ID : SB21B.7988

Amount of Each Disbursement this Period

73.25

Full Name (Last, First, Middle Initial)

C. Maelstrom Technology Services, LLC

Mailing Address 200 S. Executive Drive, #101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement
online fundraising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 01 2015
Transaction ID : SB21B.7999

Amount of Each Disbursement this Period

16.21

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

97.10

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

American Liberty PAC

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

American Liberty PAC

32.00

Category/
Type

MM / DD / YYYY

18.16

Category/
Type

Three digital displays are shown, each with a row of small squares above the main display area. The first display shows '06' with two squares above it. The second display shows '24' with two squares above it. The third display shows '2015' with four squares above it. The displays are separated by slashes.

33.01

Category/
Type

Percentage of students who did not pass the exam
83.17

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

American Liberty PAC

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 35

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Liberty PAC

Full Name (Last, First, Middle Initial)

A. Robert Watkins & Company

Mailing Address 610 S. Boulevard

City
TampaState
FLZip Code
33606Purpose of Disbursement
accounting services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 12 2015
Transaction ID : SB21B.7856

Amount of Each Disbursement this Period

231.58

Full Name (Last, First, Middle Initial)

B. Robert Watkins & Company

Mailing Address 610 S. Boulevard

City
TampaState
FLZip Code
33606Purpose of Disbursement
accounting services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 24 2015
Transaction ID : SB21B.7866

Amount of Each Disbursement this Period

390.86

Full Name (Last, First, Middle Initial)

C. Robert Watkins & Company

Mailing Address 610 S. Boulevard

City
TampaState
FLZip Code
33606Purpose of Disbursement
accounting services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 24 2015
Transaction ID : SB21B.7867

Amount of Each Disbursement this Period

109.14

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

731.58

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

American Liberty PAC

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

American Liberty PAC

2000.00

4000.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

American Liberty PAC

State: District:

03 / 05 / 2015

A horizontal bar with a value of 2500.00. The bar is light gray and has a series of small vertical tick marks along its top and bottom edges. The value "2500.00" is displayed in black text at the right end of the bar.

State: District:

03 / 16 / 2015

Amount of Each Disbursement this Period

1000.00

State: District:

5500.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

American Liberty PAC

2500.00

State: District:

MM / DD / YYYY

2000.00

State: District:

05 / 07 / 2015

1000.00

State: District:

5500.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

American Liberty PAC

State: District:

MM / DD / YYYY

1500.00

State: District:

MM / DD / YYYY

1500.00

State: District:

4000.00

29084.95

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 34 OF 35

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
American Liberty PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Impact Analytics, LLCNature of Debt (Purpose):
online advertising

Mailing Address 1515 N. Federal Highway, #305

City State

Zip Code

Boca Raton

FL

33432

Outstanding Balance Beginning This Period

2228.63

Transaction ID : SD10.7717

Amount Incurred This Period

0.00

Payment This Period

2228.63

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Robert Watkins & CompanyNature of Debt (Purpose):
accounting services

Mailing Address 610 S. Boulevard

City State

Zip Code

Tampa

FL

33606

Outstanding Balance Beginning This Period

768.42

Transaction ID : SD10.7634

Amount Incurred This Period

0.00

Payment This Period

768.42

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Robert Watkins & CompanyNature of Debt (Purpose):
accounting services

Mailing Address 610 S. Boulevard

City

State

Zip Code

Tampa

FL

33606

Outstanding Balance Beginning This Period

622.44

Transaction ID : SD10.7707

Amount Incurred This Period

0.00

Payment This Period

622.44

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 35 OF 35

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
American Liberty PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Robert Watkins & Company

Nature of Debt (Purpose):
accounting services

Mailing Address 610 S. Boulevard

City State
TampaZip Code
FL 33606

Outstanding Balance Beginning This Period

2079.30

Transaction ID : SD10.7810

Amount Incurred This Period

0.00

Payment This Period

2079.30

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ►

0.00

2) TOTALS This Period (last page this line number only)..... ►

0.00

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►